



FP-84F

The Commonwealth of Massachusetts
Department of Fire Services
Office of the State Fire Marshal
Post Office Box 1025 - Stow, Massachusetts 01775

TO: Massachusetts Burn Injury Reporting System

FROM: _____
Name of Hospital and Attending Physician

RE: Burn Injury Extending to 5% or More of Body Surface Area

To fax burn injury reports, dial (978) 567-3199.

When you fax the burn report, you satisfy both the telephone and written reporting notification requirements for the State Fire Marshal. You still need to notify the police chief in the community where the burn occurred.

-OR-

Call 1-800-475-3443 anytime to report burns over the phone AND mail this sheet to the above address.

Victim's Name _____
Last First M.

Victim's Home Address _____
Street Address (No PO Boxes) City / Town State Zip

Victim's Age _____ Gender _____ Local Police Department Notified? ☐ Yes ☐ No
Was the Victim at Work When Burned? ☐ Yes ☐ No
Date of Burn _____ If Yes: Employer _____

Address Where Burn Occurred _____
Street Address (No PO Boxes) City / Town State Zip

Part of Body Injured or %BSA: _____

Cause of Burn (e.g. spilled coffee, tap water, clothing ignited while cooking): _____

Type of Burn: *(check one)*

- | | | |
|------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Flame | <input type="checkbox"/> Scald | <input type="checkbox"/> Chemical |
| <input type="checkbox"/> Fire | <input type="checkbox"/> Electrical | <input type="checkbox"/> Sunburn |
| <input type="checkbox"/> Explosion | <input type="checkbox"/> Contact | <input type="checkbox"/> Other |

Severity: *(check one)*

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Minor | <input type="checkbox"/> Life-threatening |
| <input type="checkbox"/> Moderate | <input type="checkbox"/> Dead |
| <input type="checkbox"/> Severe | |

If you have any questions about the Massachusetts Burn Injury Reporting System, call the Fire Data and Public Education Unit at (978) 567-3380 or leave a message at 1-800-475-3443.

NEW
Burn Hotline
1-800-475-3443

FAX Reporting Number
1-978-567-3199

**Massachusetts General Law Chapter 112, Section 12A,
Amended by the Acts of 1986 and 1996 (Excerpted)**

“Every physician ... examining or treating a person with a burn injury affecting five per cent or more of the surface area of his body, or, whenever any such case is treated in a hospital, sanitarium or other institution, the manager, superintendent or other person in charge thereof, shall report such case... at once to the state fire marshal and to the police in the community where the burn occurred...Whoever violates any provision of this section shall be punished by a fine of not less than fifty nor more than one hundred dollars.”